

Guidelines for OVHA Coverage

ITEM: Support Surfaces (Mattresses)

DEFINITIONS:

Support surfaces: A mattress or mattress overlay which provides an individual in a hospital bed with support and pressure relief.

GUIDELINES:

Group 1 support surfaces: For beneficiaries who:

- Are completely immobile OR
- Have limited mobility AND impaired nutritional status, incontinence, altered sensation, compromised circulatory status, and exposure to shear and/or friction forces, which can be documented by use of the Braden Scale, OR
- Have any stage pressure ulcer AND impaired nutritional status, incontinence, altered sensation, or compromised circulatory status.

Covered items include powered and non powered overlays, and mattresses made of foam, air, water, or gel.

Group 2 support surfaces: For beneficiaries who:

- Have multiple stage II pressure ulcers located on the trunk or pelvis AND have been on a comprehensive ulcer treatment program for at least the past month, including the use of a group 1 support surface AND the ulcers have stayed the same or worsened, OR
- Have large or multiple stage III or IV pressure ulcer(s) on the trunk or pelvis OR
- Have had a recent myocutaneous flap or skin graft for a pressure ulcer on the trunk or pelvis within the past 60 days AND have been on a group 2 or 3 support surface immediately before discharge from a hospital or nursing facility OR
- Have limited mobility AND impaired nutritional status, incontinence, altered sensation, compromised circulatory status, and exposure to shear and/or friction forces, which can be documented by use of the Braden Scale.

The comprehensive treatment mentioned above should include (and be demonstrated by supporting documentation): beneficiary/caregiver education, regular comprehensive assessment by an appropriate health practitioner, appropriate turning and positioning, appropriate wound care, appropriate management of incontinence and moisture, appropriate nutritional management, appropriate mobility techniques to prevent shear and friction forces, appropriate protection of all bony prominences, appropriate pressure reduction on all non-bed surfaces the beneficiary encounters (for example, commode, wheelchair, recliner).

Covered items include low air loss mattresses, alternating air pressure mattress, powered flotation mattress, non powered mattress overlay, adjustable zone mattress. This equipment must come with supporting literature that documents the product's effectiveness for treatment of conditions as listed in the guidelines above.

Group 3 support surfaces: For beneficiaries who:

- Have a stage III or IV pressure ulcer AND
- Are bedridden or chair bound AND
- Require institutionalization in the absence of the group 3 support surface AND
- Have not succeeded in progression toward healing despite a month of conservative treatment including frequent repositioning, use of a group 2 support surface, treatment to resolve any wound infection, optimization of nutrition, debridement of devitalized tissue, maintenance of a clean, moist wound bed with appropriate dressings, caregiver education, assessment by an appropriate health care practitioner, incontinence management, appropriate mobility techniques to prevent shear and friction forces, appropriate protection of all bony prominences, appropriate pressure reduction on all non-bed surfaces the beneficiary encounters (for example, commode, wheelchair, recliner) AND
- A trained, adult caregiver is available to assist the individual with activities of daily living, fluid balance, skin care, repositioning, recognition and management of altered mental status, dietary needs, prescribed treatments, and management and support of the group 3 device and its problems, such as leakage AND
- Have physician' orders for the group 3 device.

CAUTIONS: Excellent skin care and comprehensive evaluation and treatment are the first line of defense against pressure. No device can ever take the place of proper care.

Significant caution should be used with products that allow the beneficiary to “bottom out”: compress the material so that it does not have any pressure reducing effect. This should be evaluated by placing the hand beneath the device, under a bony prominence. Caution should also be used with devices that do not have waterproof covers, particularly with incontinent individuals or those with draining lesions.

An air fluidized bed is contraindicated for a beneficiary with pulmonary disease because of lack of firm support for effective coughing and because of the thickening of pulmonary secretions from the dry air. There is disagreement in the literature about the drying effect of moist dressings on an air fluidized bed, so caution should be exercised when the moist dressing is not covered with an occlusive cover dressing. The structural strength and electrical system's capacity in the location where the air fluidized bed will be used should be considered. The bed weighs 1600 lbs.

EXAMPLES OF DIAGNOSES: Any diagnosis which results in the immobility of the individual to the extent that pressure ulcers develop. These include neurological diagnoses such as multiple sclerosis, amyotrophic lateral sclerosis, severe stroke, spinal cord injury, and traumatic brain injury; orthopedic diagnoses such as severe rheumatoid arthritis, cardiopulmonary diagnoses such as severe cardiomyopathy, and other diagnoses that result in immobility, such as Alzheimer's disease and catatonia.

REFERENCES:

Complete Guide to Medicare Coverage Issues. St. Anthony Press, Nov 2001. Ingenix Inc., Reston, VA.

Regional Medical Review Policies, Tricenturion, LLC, Columbia SC.
www.tricenturion.com.

Krasner, D. Chronic Wound Care, Third Edition. HMP Communications, Wayne, PA, 2001.

Medical Director's signature:

OVHA Director's signature:

Date:

Revision 1:

Revision 2:

Revision 3: